

In the Claims:

Please amend claims 1-3, 7-12, 15, 16, 24, and 25.

1. **(Currently amended)** A method of treating a subject suffering from a spondyloarthropathy comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, to the subject, wherein the antibody dissociates from human TNF $\alpha$  with a  $K_d$  of  $1 \times 10^{-8}$  M or less and a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, both determined by surface plasmon resonance, and neutralizes human TNF $\alpha$  cytotoxicity in a standard *in vitro* L929 assay with an  $IC_{50}$  of  $1 \times 10^{-7}$  M or less, such that the spondyloarthropathy is treated.
2. **(Currently amended)** A method of treating a subject suffering from a spondyloarthropathy comprising administering a therapeutically effective amount a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, with the following characteristics:
  - a) dissociates from human TNF $\alpha$  with a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, as determined by surface plasmon resonance;
  - b) has a light chain CDR3 domain comprising the amino acid sequence of SEQ ID NO: 3, or modified from SEQ ID NO: 3 by a single alanine substitution at position 1, 4, 5, 7 or 8 or by one to five conservative amino acid substitutions at positions 1, 3, 4, 6, 7, 8 and/or 9;
  - c) has a heavy chain CDR3 domain comprising the amino acid sequence of SEQ ID NO: 4, or modified from SEQ ID NO: 4 by a single alanine substitution at position 2, 3, 4, 5, 6, 8, 9, 10 or 11 or by one to five conservative amino acid substitutions at positions 2, 3, 4, 5, 6, 8, 9, 10, 11 and/or 12.
3. **(Currently amended)** A method of treating a subject suffering from a spondyloarthropathy comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, with a light chain variable region (LCVR) comprising the amino acid sequence of SEQ ID NO: 1 and a heavy chain variable region (HCVR) comprising the amino acid sequence of SEQ ID NO: 2.
4. **(Original)** The method of any one of claims 1, 2, and 3, wherein the antibody, or antigen-binding fragment thereof, is D2E7.
5. **(Original)** The method of any one of claims 1, 2, and 3, wherein the spondyloarthropathy is ankylosing spondylitis.

6. **(Original)** The method of any one of claims 1, 2, and 3, wherein the spondyloarthropathy is selected from the group consisting of arthritis mutilans, psoriatic arthritis, psoriasis associated with arthritis, Reiter's syndrome, reactive arthritis, and undifferentiated spondyloarthropathies.
7. **(Currently amended)** A method of treating a subject suffering from ankylosing spondylitis comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, to the subject, wherein the antibody dissociates from human TNF $\alpha$  with a  $K_d$  of  $1 \times 10^{-8}$  M or less and a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, both determined by surface plasmon resonance, and neutralizes human TNF $\alpha$  cytotoxicity in a standard *in vitro* L929 assay with an  $IC_{50}$  of  $1 \times 10^{-7}$  M or less, such that said ankylosing spondylitis is treated.
8. **(Currently amended)** A method of treating a subject suffering from ankylosing spondylitis comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, with the following characteristics:
- a) dissociates from human TNF $\alpha$  with a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, as determined by surface plasmon resonance;
  - b) has a light chain CDR3 domain comprising the amino acid sequence of SEQ ID NO: 3, or modified from SEQ ID NO: 3 by a single alanine substitution at position 1, 4, 5, 7 or 8 or by one to five conservative amino acid substitutions at positions 1, 3, 4, 6, 7, 8 and/or 9;
  - c) has a heavy chain CDR3 domain comprising the amino acid sequence of SEQ ID NO: 4, or modified from SEQ ID NO: 4 by a single alanine substitution at position 2, 3, 4, 5, 6, 8, 9, 10 or 11 or by one to five conservative amino acid substitutions at positions 2, 3, 4, 5, 6, 8, 9, 10, 11 and/or 12.
9. **(Currently amended)** A method of treating a subject suffering from ankylosing spondylitis comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, with a light chain variable region (LCVR) comprising the amino acid sequence of SEQ ID NO: 1 and a heavy chain variable region (HCVR) comprising the amino acid sequence of SEQ ID NO: 2.
10. **(Currently amended)** The method of any one of claims 7, 8, or 9, wherein the ~~TNF $\alpha$~~  antibody, or antigen binding fragment thereof, is D2E7.

11. **(Currently amended)** The method of any one of claims 7, 8, or 9, wherein the ~~TNF $\alpha$~~  antibody is administered with at least one additional therapeutic agent.
12. **(Currently amended)** A method for inhibiting human TNF $\alpha$  activity in a human subject suffering from spondyloarthropathy comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, to the subject, wherein the antibody dissociates from human TNF $\alpha$  with a  $K_d$  of  $1 \times 10^{-8}$  M or less and a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, both determined by surface plasmon resonance, and neutralizes human TNF $\alpha$  cytotoxicity in a standard *in vitro* L929 assay with an  $IC_{50}$  of  $1 \times 10^{-7}$  M or less.
13. **(Original)** The method of claim 12, wherein the spondyloarthropathy is ankylosing spondylitis.
14. **(Original)** The method of claim 12, wherein the spondyloarthropathy is selected from the group consisting of arthritis mutilans, psoriatic arthritis, psoriasis associated with arthritis, Reiter's syndrome, reactive arthritis, and undifferentiated spondyloarthropathies.
15. **(Currently amended)** The method of any one of claims 12, 13, and 14, wherein the ~~TNF $\alpha$~~  antibody, or antigen-binding fragment thereof, is D2E7.
16. **(Currently amended)** A method for inhibiting human TNF $\alpha$  activity in a human subject suffering from ankylosing spondylitis, comprising administering a therapeutically effective amount of a human ~~TNF $\alpha$~~  antibody, or an antigen-binding fragment thereof, to the subject, wherein the antibody dissociates from human TNF $\alpha$  with a  $K_d$  of  $1 \times 10^{-8}$  M or less and a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, both determined by surface plasmon resonance, and neutralizes human TNF $\alpha$  cytotoxicity in a standard *in vitro* L929 assay with an  $IC_{50}$  of  $1 \times 10^{-7}$  M or less.
17. **(Original)** The method of claim 16, wherein the antibody, or antigen binding fragment thereof, is D2E7.
18. **(Original)** A method of treating a subject suffering from a spondyloarthropathy comprising administering a therapeutically effective amount of D2E7, or an antigen-binding fragment thereof, to the subject, such that the spondyloarthropathy is treated.

19. **(Original)** The method of claim 18, wherein the spondyloarthropathy is ankylosing spondylitis.
20. **(Original)** The method of claim 18, wherein the spondyloarthropathy is selected from the group consisting of arthritis mutilans, psoriatic arthritis, psoriasis associated with arthritis, Reiter's syndrome, reactive arthritis, and undifferentiated spondyloarthropathies.
21. **(Original)** A method of treating a subject suffering from ankylosing spondylitis comprising administering a therapeutically effective amount of D2E7, or an antigen-binding fragment thereof, to the subject, such that said ankylosing spondylitis is treated.
22. **(Original)** A method of treating a subject suffering from a spondyloarthropathy comprising administering a therapeutically effective amount of D2E7, or an antigen-binding fragment thereof, and at least one additional therapeutic agent to the subject, such that the spondyloarthropathy is treated.
23. **(Original)** The method of claim 22, wherein the additional therapeutic agent is selected from the group consisting of ibuprofen, diclofenac and misoprostol, naproxen, meloxicam, indomethacin, and diclofenac.
24. **(Currently amended)** A kit comprising:  
a) a pharmaceutical composition comprising a human TNF $\alpha$  antibody, or an antigen binding portion thereof, and a pharmaceutically acceptable carrier, wherein the antibody dissociates from human TNF $\alpha$  with a  $K_d$  of  $1 \times 10^{-8}$  M or less and a  $K_{off}$  rate constant of  $1 \times 10^{-3} \text{ s}^{-1}$  or less, both determined by surface plasmon resonance, and neutralizes human TNF $\alpha$  cytotoxicity in a standard *in vitro* L929 assay with an  $IC_{50}$  of  $1 \times 10^{-7}$  M or less; and  
b) instructions for administering to a subject the human TNF $\alpha$  antibody pharmaceutical composition for treating a subject who is suffering from a spondyloarthropathy.
25. **(Currently amended)** A kit according to claim 22, wherein the ~~TNF $\alpha$~~  antibody, or an antigen binding portion thereof, is D2E7.